

PTO/SB/82 (06-03)

Approved for use through 11/30/2005, OMB 0651-0035  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REVOCATION OF POWER OF  
ATTORNEY and APPOINTMENT OF  
NEW POWER OF ATTORNEY**

Application Number	10/081,583
Filing Date	February 22, 2002
First Named Inventor	ROBINSON
Art Unit	3713
Examiner Name	CHRISTMAN
Attorney Docket Number	1064U002

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners at Customer Number:

000041461

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with  
Customer Number:

000041461

OR

☐ Firm or  
Individual Name

Charles A. Rattner, Esq.

Address

12 Homewood Lane

Address

City

Darien

Country

USA

State

CT

Zip

06820

Telephone

(203) 662-9858

Fax

(203) 547-6129

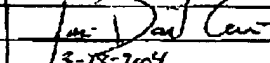
I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name

Jose Garcia

Signature



Date

3-18-2004

Telephone

212-809-8400

NOTE: Signatures of all the inventors or assignees of record of the entire interest, or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 5 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-6199 and select option 2.

PTO/SB/82 (08-03)  
Approved for use through 11/30/2005. OMB 0651-0034  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>REVOCATION OF POWER OF ATTORNEY and APPOINTMENT OF NEW POWER OF ATTORNEY</b>	Application Number	10/081,583
	Filing Date	February 22, 2002
	First Named Inventor	ROBINSON
	Art Unit	3713
	Examiner Name	CHRISTMAN
	Attorney Docket Number	1064U002

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners at Customer Number: 000041461

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: 000041461

OR

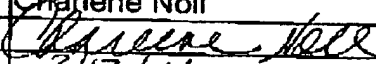
<input type="checkbox"/> Firm or Individual Name	Charles A. Rattner, Esq.				
Address	12 Homewood Lane				
Address					
City	Darien				
Country	USA	State	CT	Zip	06820
Telephone	(203) 662-9858	Fax	(203) 547-6129		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	Charlene Noll				
Signature					
Date	3/17/04		Telephone	212-809-8400	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 5 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-8199 and select option 2.

PTO/SB/82 (08-03)  
Approved for use through 11/30/2005. OMB 0661-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>REVOCATION OF POWER OF ATTORNEY and APPOINTMENT OF NEW POWER OF ATTORNEY</b>	Application Number	10/081.583		
	Filing Date	February 22, 2002		
	First Named Inventor	ROBINSON		
	Art Unit	3713		
	Examiner Name	CHRISTMAN		
Attorney Docket Number		1064U002		

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners at Customer Number: 000041481

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: 000041481

OR

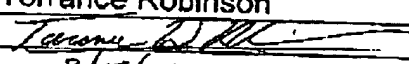
<input type="checkbox"/> Firm or Individual Name	Charles A. Rattner, Esq.			
Address	12 Homewood Lane			
City	Darlen			
Country	USA	State	CT	Zip
Telephone	(203) 662-9858	Fax	(203) 547-6129	

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	Torrance Robinson		
Signature			
Date	3/17/04	Telephone	212-809-8400

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 5 forms are submitted.

This collection of information is required by 37 CFR 1.35. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 36 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 9 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  
If you need assistance in completing this form, call 1-800-PTO-9199 and select option 2.

PTO/SB/62 (06-03)  
Approved for use through 11/30/2005. OMB 0651-0035  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>REVOCATION OF POWER OF ATTORNEY and APPOINTMENT OF NEW POWER OF ATTORNEY</b>	Application Number	10/081,583
	Filing Date	February 22, 2002
	First Named Inventor	ROBINSON
	Art Unit	3713
	Examiner Name	CHRISTMAN
	Attorney Docket Number	10641002

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners at Customer Number: 000041461

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: 000041461

OR

<input type="checkbox"/> Firm or Individual Name	Charles A. Rattner, Esq.				
Address	12 Homewood Lane				
Address					
City	Darien				
Country	USA	State	CT	Zip	06820
Telephone	(203) 662-9858	Fax	(203) 547-6129		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	Daniel Watts		
Signature	<i>[Signature]</i>		
Date	March 17, 2004	Telephone	212-809-8400

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 5 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/02 (08-03)  
Approved for use through 11/30/2003. OMB 0661-0035  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>REVOCATION OF POWER OF ATTORNEY and APPOINTMENT OF NEW POWER OF ATTORNEY</b>	Application Number	10/081,583
	Filing Date	February 22, 2002
	First Named Inventor	ROBINSON
	Art Unit	3713
	Examiner Name	CHRISTMAN
	Attorney Docket Number	1064U002

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners at Customer Number: 000041481

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: 000041481

OR

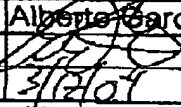
<input type="checkbox"/> Firm or Individual Name	Charles A. Rattner, Esq.				
Address	12 Homewood Lane				
Address					
City	Darien				
Country	USA	State	CT	Zip	06820
Telephone	(203) 662-9858	Fax	(203) 547-6129		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Alberto Garcia				
Signature					
Date	3/2/04		Telephone	212-809-8400	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 5 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.